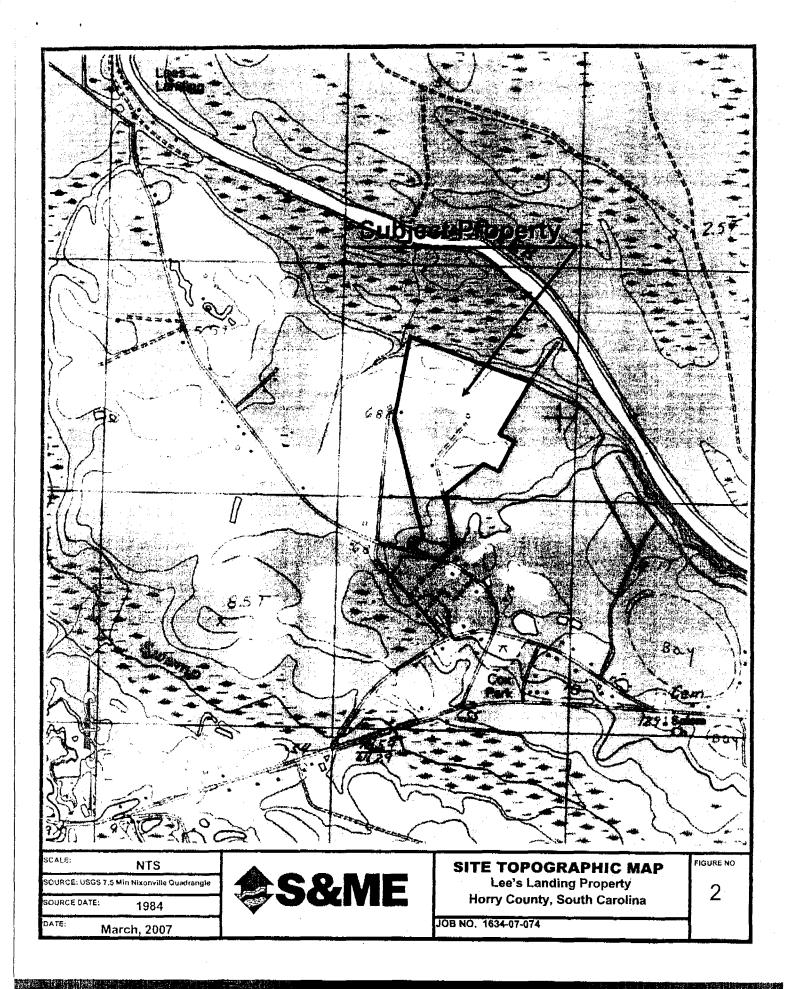
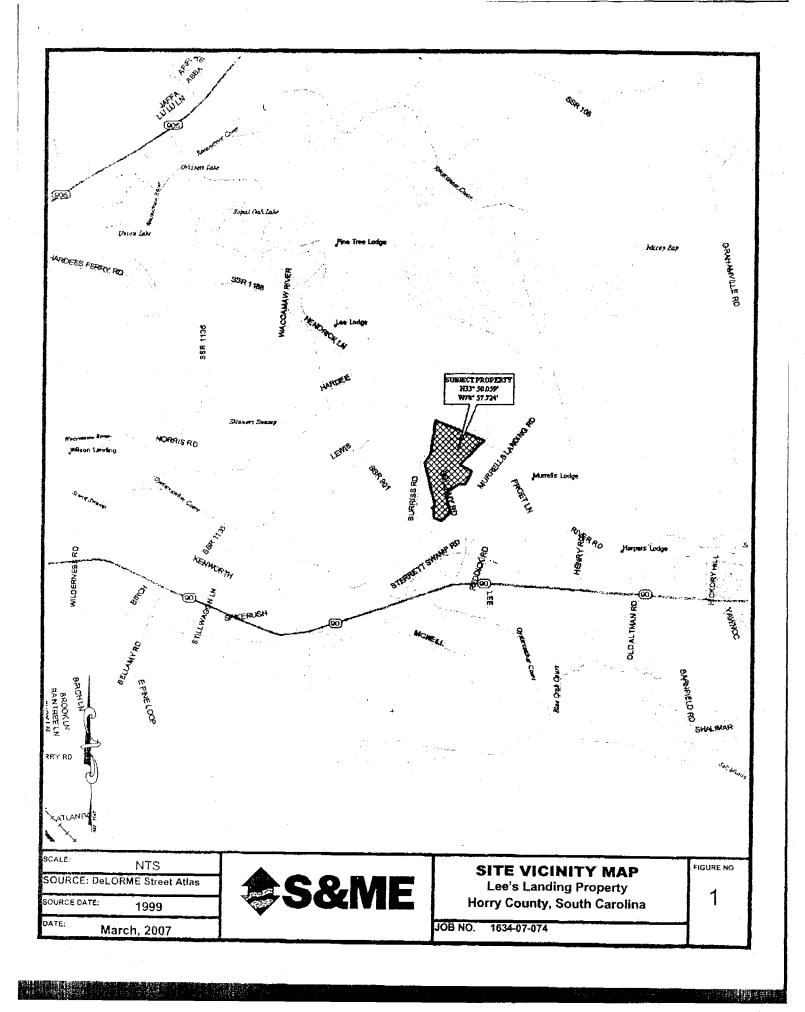


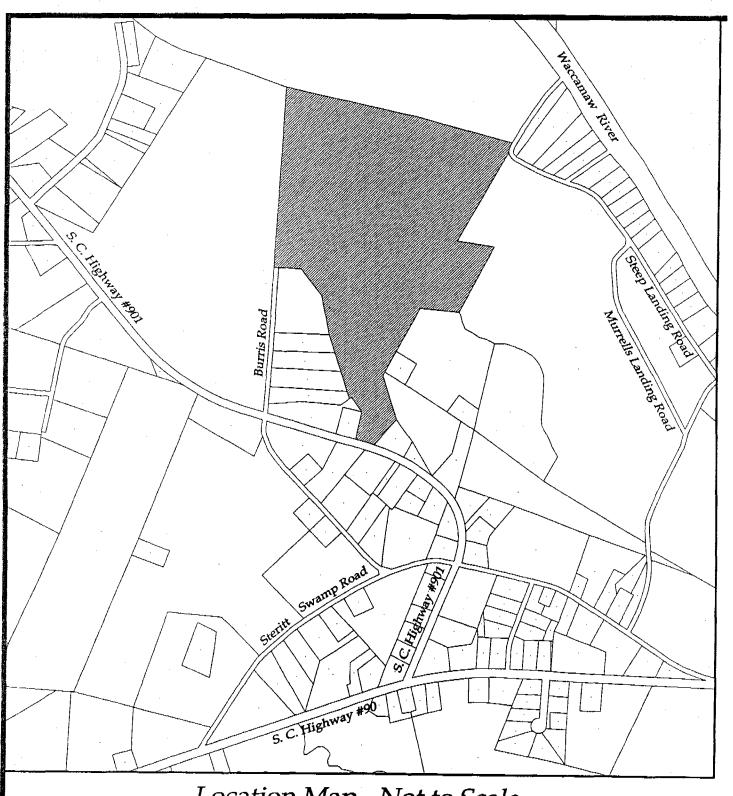
FOR Official use only		al use only		
File number: 26-08-03-04				
Permit number: SCR10. I 492				
Submittal package complete: $3 - 10 - 08$			•	
Public Notice Start Date (OCRM only): 3-14) I			
Submission of an NOI constitutes notice the entity identified in Section Lintends to be auti				
under SCR100000, Instructions on page 5.	TOTIZE O			
Date: 12/6/2007				
Project/ Site Name: Royal Palms Plantation				County: Horry
Do you want this project to be considered	tor the Expedited	d Review Progra	am (ERP)? □Ye	S □ NO (See instruction
If yes, is the design of this project above reg 1. Project Information	lolatory requireme	nis or Low impo	ict Developmer	ats Lives Lino
Project Owner/ Operator (Company or	person): Gold Coa	st Development	Corp. Inc.	
Company EIN:[2]0[-[4]6[6]2[3]7[6]	Phone:	843-340-6891	Fax:	843-903-7396
Mailing Address: 261 Shore Wood Drive	<u>-</u>	City: Myr	lle Beach	State: SC Zip: 295
Permit Contact (if owner is company): N	like Chaffin		Phone:	843-340-6891
Mailing Address: <u>261 Shore Wood Drive</u> Email address (optional):	·	City: <u>Myr</u>	tle Beach	State: <u>sc</u> Zip: 295
II. Property Information				
A. Site Location (street address, nearest	intersection, etc.	: NE of Intersection	on of Burrise Rd &	Lee's Landing Cir
City/ Town (It in limits);	Latitu	de: 33 ° 49′ 40′	'N Lonaitude:	-78°57' 48" W
Tax map # (list all): TMS#138-00-04-0)44, 139-00-01 -00 2	! & 139-00 - 01-05	<u>51</u>	
B. Property Owner: Gold Coast Develop	ment Corp. Inc.		Phone:	843-340-6891
Mailing Address: <u>261 Shore Wood Drive</u> III. Slie Information		City: Myr	tle Beach S	State: <u>sc</u> Zip: 2957
A. Disturbed area (to the nearest tenth	of an acre): 7	7.0 acres Tota	alaroo: ex	
B. Is this project part of a Larger Comm	on Plan for Develo	pment or Sale (ICP) STTYES IXI	3 acres No
LCP/ Overall Development Name:			Check her	e if this is the first ph
Previous state permit/ file number:		Previous NPDE	S coverage num	nber: SCR10
C. Start Date (MM/DD/YYYY): 03/01/200 D. Is this site located on Indian Lands?		Cor	npletion Date:	09/01/2008
E. Type of Activity (check one):		yes, name of res ommercial	servation	☐ Industrial
☐ Institutional ☑ Residential: Sing		ulti-use (Comme	rcial & Residen	tial) 🗆 Other:
☐ Linear ☐ Residential: Mu	lti-family 🔲 Site	e Preparation (N	lo new impervi	ous)
f. Aré there any flooding problems dov	vnstream of or adi	acent to this site	e? □Yes ⊠No	
G. Has S.C. DHEC issued a Notice to Col	mply or Notice of '	Violation for this	site or LCP?□Y	'es ⊠No
H. Is any part of the property located in	iside an MS4 or urb	oanized area?🗵]Yes □No	
If yes, list the MS4 operator or urbaniz List all state and federal environment	tea area name, <u>Ha</u> tal permits or appr	ovals applied to		
-		ovais applied it	or obtained in	or this site (e.g., RC
V. Waterbody Information	1			
A. Nearest receiving waterbody(s)[RWB Classification of nearest RWB: ORW	J. <u>Waccamaw River</u>	Nevt/Negrost	Distance to ne named RWB: A	arest RWB (feet): 1
B. 1. Waters of the U.S./ State	On the site?			
b. 1. Wales of the o.s./ state	Ou me alles	Delineated/ Identified?	Impacts?	Amount of impo
a. Jurisdictional wetlands		☑Yes ☐ No	☐Yes ⊠No	Ac
b. Non-jurisdictional wetlands	▼Yes □ No	X Yes ☐ No	Yes □ No	1.700 Ac
c. Other Water(s) List:	☐ Yes 図 No	☐ Yes ☐ No	☐ Yes ☐ No	Ac
		<u> </u>		
2. If yes for impacts in B.1, describe each in DHEC General Permitt and certifications	pact and activity	, and list all per	nits (e.g., USAC	OE Nationwide per
DHEC General Permit) and certifications Proposed fill of (3) isolated wetlands on site 0	inai nave n ee n ai	DINIAM FOR AR AIN	ついへん けっと へっぺん	impact.
_				
Mitigation is to buffer remaining wetlands on si				

Project 70450094

C.	List	paired Waterbodies (See instructions.) t the negrest DHEC water quality monitorin	ng station(s) [WQMS(s)] to which constructio	n stormwater (SIAI) disabassa
	1 6 2 1 1	li dian and the corresponding waterbod	(/c) NED 440 (Maja ta) - (Maja	
	1.	 Is this WQMS(s) listed on the most current 	y(s).MD-110 Waterbody(s): Wac nt 303(d) List for Impaired Waters? \(\sigma\)Yes \(\overline{\text{X}}\)	INO
		 a. If ves for 1, list the impairment(s). 	•	
		b. If yes for 1, will the site's construction	n SW discharges contain any pollutant(s) ca	iusing the impairment(s)?
		☐ Yes ☐ No c. If ves for b. list the impairment(s) affe	ected by the pollutant(s) referenced in b. $_$	
		 d. If yes for b, will use of the proposed t 	BMPs ensure that the site's discharges will n	of contribute to or cause
	_	further water quality standard violat	ions for the impairment(s) listed in $c^2 \square Yes$	□No
	2.	 Has a TMDL(s) been developed for this t 	WQMS(s)? ⊠Yes □No	_
		a. If yes for 2, list the impairment(s). Do	A	
		 D. If yes for 2, has the standard been a If no for h, will the site's construction. 	ttained for all impairment(s)?□Yes 国No SW discharges contain any pollutant(s) cat	sing the impairment/sl2
		LIYes ⊠No		
		d. If yes for c, are your discharges cons	sistent with the assumptions and requiremen	nts of the TMDL(s)?
_	٠.	LJYes □No		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
D.	1. <i>P</i>	Are S.C. Navigable Waters (SCNW) on the a. If yes for 1, list the name of the SCNV	site? □Yes ⊠No	
		b. If yes for 1, list the name of the scino	v: vities cross over or occur in, under, or throug	the SCANACE TVOS TANA
		 c. If yes for b, then describe activities. 		•
		d. If yes for b, are the activities in SCN \overline{N}	v covered under a DHEC General Permit or	other DHEC permit?
		□Yes □No		•
		e. If no for d, has an SCNW permit beer \(\subseteq\text{Yes, for all activities}\) \(\subseteq\text{Yes, for so}\)	n applied for or issued for the site?	
		f. If yes for d or e, list permit number(s)	and corresponding activities	
		7 T T T T T T T T T T T T T T T T T T T		
٧.	<u>O</u> r	perator information		
	A,	SWPPP Preparer: James M. Wooten, PE	S.C.	Registration #: 9160
		Company/ Firm: DDC Engineers, Inc.		S.C. COA #: 0 0 0 3 6
		Mailing Address: 1298 Professional Drive	City: Myrtle Beach	State: SC Zip: 29577
		Phone: (Day) <u>843-692-3200</u>	(Mobile) (Fax):	843-692-3210
	р	Email address (optional): imw@ddcinc.com	n	
	ь.	Mailing Address: 261 Share Wood Drive	DDSA] (Company or person): Gold Coast Dev	elopment Corp. Inc.
		MONING ACIDIESS 261 Shore Wood Drive	City (May -4) - D	Ctatara a Time
		Phone: 040 040 0004	City: Myrtle Beach	State: <u>SC</u> Zip: 29579
		Phone: 843-340-6891	Fax: <u>843-903-7396</u>	
VI.	Sia	Phone: <u>843-340-6891</u> Site Contact (if ODSA is company): Mike	Fax: 843-903-7396 Chaffin Phone:	843-340-6891
VI.	<u>Sig</u>	Phone: <u>843-340-6891</u> Site Contact (if ODSA is company): <u>Mike</u> <u>Instrues and Certifications: DO NOT SIG</u>	Fax: <u>843-903-7396</u> <u>Chaffin</u> Phone: N IN BLACK INK!	843-340-6891
VI.	Α.	Phone: <u>843-340-6891</u> Site Contact (if ODSA is company): <u>Mike</u> <u>Instructs and Certifications: DO NOT SIG</u> One copy of the SWPPP, all specifications of	Fax: 843-903-7396 Chaffin Phone: N IN BLACK INK! and supporting calculations, forms, and report	843-340-6891
VI.	Α.	Phone: <u>843-340-6891</u> Site Contact (if ODSA is company): <u>Mike</u> <u>Instructs and Certifications: DO NOT SIG</u> One copy of the SWPPP, all specifications of and made a part of this application. I have	Fax: 843-903-7396 Cheffin Phone: N IN BLACK INK! and supporting calculations, forms, and repore placed my signature and seal on the design	843-340-6891 ts are herewith submitted
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Location Mav - Not to Scale

